### RECREATION DEPARTMENT

## **Summer 2014 Employment Application – Recreation Counselor**

Please complete and submit the information listed below if you are seeking employment with the Wellfleet Recreation Department for the 2014 summer season, including those of you who have previously worked for the Department:

- Town of Wellfleet Job Application (see official form below)
- CPR and First Aide Certification (updated cards from the American Red Cross or comparable)
- Updated immunization records. (Obtain from school or family physician)
- Valid working papers for all applicants 18 and under.
- Birth Certificate (All applicants must be at least 16 years of age)
- One page written Summary of your experiences working with children and why you want to be a morning recreation counselor, swimming instructor, tennis or skateboard park monitor.
- Provide three written lesson plans for activities which you have coordinated for groups of children
  or participated in yourself which you could contribute to our summer recreation program. Be
  prepared to demonstrate these activities to the other counselors in the program. (If applying for
  morning recreation counselor positions only)

All applicants, including those who worked for the department before, will be required to meet with me for an interview before being hired.

Please return all paper work to the Recreation Department as soon as possible to the following address:

Becky Rosenberg, Director Wellfleet Recreation Department 300 Main Street Wellfleet, Ma 02667

If you have any questions please don't hesitate to call me at (508) 349-0314 ext. 116, or E-Mail me at:

Recreation@Wellfleet-Ma.Gov.

Thank you,

Becky Rosenberg Wellfleet Recreation Director

#### JOB DESCRIPTION

**Position:** Recreation Summer Counselor

**Objective**: The Recreation Summer Counselor will plan and supervise activities for a specific age

group in the Wellfleet Recreation Morning Summer Program.

Dates of Employment: June 30-August 15 (7 weeks). Employee must be available for any preprogram meetings during the week of June 23, 2014 and is REQUIRED to work at the Wellfleet Road Race on Sunday July 6, 2014 from 7:30 a.m. through 12 p.m.

#### **Experience, Qualifications, Skills required:**

• Positive, outgoing and enthusiastic behavior

- Availability to work all 7 weeks of the program preferred
- First Aid/CPR (must be an active certification)

#### Key responsibilities include:

- Ensuring all administrative requirements are completed in a timely manner, including lesson plan.
- Participating in staff meetings and in-service training sessions
- Representing the Wellfleet Recreation Swim Program in a positive and professional manner
- Auditory and visual ability to respond to critical incidents.
- Ability to perform routine first aid tasks.
- Abilities to observe camper behavior, assess its appropriateness, enforce appropriate safety regulations and emergency procedures, and apply appropriate behavior techniques.
- Specific Responsibilities:
- Assist with the planning and coordination of each weekly schedule at day camp, including planning and leading activities.
- Help the campers with daily self-maintenance tasks: i.e., collecting lunches upon arrival at camp and eating lunch together; helping your campers prepare for swimming; and being sure all personal belongings get home each night.
- Offer guidance in-group and camp-wide activities.
- Keep camp supplies and equipment in good shape, including putting them away when finished with a project.
- At all times be aware that you are a "model" to all campers and to other staff. No drinking, smoking, or drugs at any time.
- Participate in all training activities that are provided by the camp that aids you in personal growth and skill development (including pre-camp orientation).
- Overall safety of program participants
- Actively interacting with parents and students

**Salary Range:** \$9.50-\$12.50 per hour/commensurate with experience and certification level.



# EMPLOYMENT APPLICATION

# Please read this before filling out this application

The Town of Wellfleet does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, handicap, veteran status, gender, age, sexual orientation of genetic information. No question in this application is intended to secure information to be used for such discrimination.

All questions should be answered clearly, completely and accurately in your own handwriting. If you need more space, please attach a separate sheet. Please print and use ink.

# **PERSONAL** Name \_ Middle Address City/Town Number/Street Zip Code State Mailing Address City/Town State Zip Code (If different) PO Box or Street Address E-mail \_\_\_\_\_\_Telephone (\_\_\_\_\_)\_\_\_\_ Position(s) desired \_\_\_\_\_ Date Available Social Security Number may be requested at a later date for a background check with your consent, or if individual is hired. **GENERAL INFORMATION** How were you referred to us? $\square$ Self ☐ School/college ☐ Newspaper or other publication - Name ☐ Employee referral – Name □ Other If you are hired and are under the age of 18, can you furnish a work permit? Have you filed an application with the Town of Wellfleet before? If yes, give date: Have you ever been employed by the Town of Wellfleet before? If yes, give date and department: Are you employed now? May we contact your present employer? ☐ Immediately ☐ After acceptance of employment □ No. If no, please give reason \_\_\_\_\_

### EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names that indicate race, color, religion, gender, national origin, sexual orientation or genetic information.

| #1                                      |                                  |      |
|---|----------------------------------|------|
| Employer:                               | Dates: From:                     | To:  |
| Address:                                |                                  |      |
| Hourly rate/salary - Starting           | Final                            |      |
| Job Title                               | Work Performed                   |      |
| Supervisor:                             | Telephone:                       |      |
| "2                                      |                                  |      |
| #2                                      | <b>D</b> . <b>D</b>              | m    |
| Employer:                               | Dates: From:                     | To:  |
| Address:                                |                                  |      |
| Hourly rate/salary - Starting           | Final                            |      |
| Job Title                               | Work Performed                   |      |
| Supervisor:                             | Telephone:                       |      |
| #3                                      |                                  |      |
| Employer:                               | Dates: From:                     | To:  |
| Address:                                |                                  |      |
| Hourly rate/salary - Starting           | Final                            |      |
| Job Title                               |                                  |      |
| Supervisor:                             | Telephone:                       |      |
| If applying for a clerical position, pl | ease answer the following questi | ions |
| Can you type? (WPM)                     |                                  |      |
| Can you use a computer?                 |                                  | ,    |
| Are you proficient with Microsoft C     | office?                          |      |
| EDUCATION HIGH SCHOOL Circle Last Year  | Completed 1 2 3 4                |      |
| Complete Address                        |                                  |      |
| Graduated: Yes No Major Course          |                                  |      |
| COLLEGE Circle Last Year Comp           | leted 1 2 3 4                    |      |
| Major Course of Study                   |                                  |      |
| Complete Address                        |                                  |      |
| Graduated: Yes No Degree or Certif      | ication received                 |      |

| OTHER SCHOOLS OR SPECIALIZED TRAINING Circle Last Year Completed 1 2 3 4  |  |  |  |
|---|--|--|--|
| Major Course of Study   |  |  |  |
| Complete Address  |  |  |  |
| Graduated: Yes No Degree or Certification received  |  |  |  |
| <b>POLYGRAPH TESTS</b> – It is illegal for an employer to utilize a polygraph or any other testing device or written examination for testing truthfulness or honesty of anyone applying for a job or of those who are presently employed.   |  |  |  |
| "It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability." (MGL 149 § 19B: Employee Polygraph Protection Act of 1988)   |  |  |  |
| REFERENCES Please list below the name of three professional or work-related references. Name and Title Company Telephone Years Acquainted   |  |  |  |
|   |  |  |  |
|   |  |  |  |
| AGREEMENT Please read before signing: I understand that receipt of this application and the granting of an interview does not imply that I will be employed.  |  |  |  |
| <b>CERTIFICATION</b> I certify that all statements made in this statement are true, complete and correct to the best of my knowledge and belief, and are made in good faith.  |  |  |  |
| I authorize persons, schools, current employer and previous employers and organizations named in this application (and accompanying resume, if any) to provide the Town of Wellfleet with any relevant information which may be required to arrive at any employment decision and I voluntarily release such persons, schools, employers and organizations from all liability for providing such information. I release the Town of Wellfleet against any liability that might result from requesting such information. |  |  |  |

Signature \_\_\_\_\_\_Date \_\_\_\_\_